# M12000001834

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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12 APR -2 M 8: 46

SECRETARY DESTRICTION OF THE ORDER

15 AND ASSET OF THE ORDER

16 AND ASSET OF THE ORDER

17 APR -2 M 8: 46

D. BRUCE

APR 0 3 2012

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION

COST LIMIT

ORDER DATE: March 9, 2012

ORDER TIME : 9:52 AM

ORDER NO. : 124987-450

CUSTOMER NO: 4365221

#### FOREIGN FILINGS

NAME: SMX, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

#### **COVER LETTER**

		Name of Limited Liability Company		
		Traine of Entitled Elability Company		
		Liability Company for Authorization to Transact Business in Florida he above referenced foreign limited liability company to transact bus		
Please return	all correspondence concerning this	s matter to the following:		
		Name of Person		
	SMX, LLC			
	Firm/Company			
	860 West Evergreen			
Address				
	Chicago, IL 60642			
		City/State and Zip Code		
	E-mail addres	s: (to be used for future annual report notification)		•
For further in	nformation concerning this matter, p	please call:	2 APR	
Dou	iglas Black	at (312 ) 397-3225	7-2	-
	Name of Person	Area Code & Daytime Telephone Number	3	П
MAILING ADDRESS:		STREET ADDRESS:	t-	
Division of Corporations		Division of Corporations	-	
Registration Section		Registration Section	. <b>•</b>	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		
	allassee, I'L 52514	Tallahassee, FL 32301		

## 'APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SMX, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
AdLab, LLC	
(If name una validable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the w consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabilit Company," "L.L.C," "LLC.")	ritten y
2. Illinois 3. 38-3860129	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. <u>12/12/2011</u> 5. <u>perpetual</u>	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 860 West Evergreen, Chicago, IL 60642	
<del></del>	
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	1
Seaton Acquisition Corp., 860 West Evergreen, Chicago, IL 60642	
RETER OF A	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recort the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	dsin
translation of the certificate under cath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	
Staffing business	
Signature of a member or an authorized representative of a member.	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a	

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Seaton Acquisition Corp., Member by Douglas Black, Secretary

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing	
Members of SMX, LLC	
(Name of Limited Liability Company)	
a limited liability company duly organized and existing under the laws of	
Illinois	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	
following name to transact business in the state of Florida:	
AdLab, LLC  (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability  Company, L.L.C., or LLC.)	
Date: 02/20/12	
Signature(s) of Manager(s) and/or Managing Member(s):	Ţ
Dayles M. Plas	
	-
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)  Date:	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
SMX, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
AdLab, LLC	<b>建筑</b>
2. The name and the Florida street address of the registered agent and office ar	PR-2
Corporation Service Company	
(Name)	STATE LORN
1201 Hays Street	<b>5</b> A
Florida Street Address (P.O. Box NOT ACCEPTABLE)	<del></del>
Tallahassee FL 32301	
City/State/Zip	<del></del>

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Gompany

(Signature)

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number

0374789-1



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SMX, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 12, 2011, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1206901664

Authenticate at: http://www.cvberdriveillinois.com

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 9TH day of MARCH A.D. 2012 .

Desse White

SECRETARY OF STATE